

NASSAU COUNTY

DEPARTMENT OF HEALTH

2002

ANNUAL REPORT

The seal of Nassau County, New York, is a circular emblem. It features a central shield with a lion rampant, holding a cross in its right paw. The shield is surrounded by a wreath. The outer ring of the seal contains the text "NASSAU COUNTY, NEW YORK" in capital letters.

Thomas R. Suozzi
Nassau County Executive

David M. Ackman, M.D., M.P.H.
Commissioner of Health

NASSAU COUNTY
DEPARTMENT OF HEALTH

2002
ANNUAL REPORT

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NASSAU COUNTY DEPARTMENT OF HEALTH
Table of Contents

	Page
The Nassau County Board of Health	6
Message from the Commissioner	9
Health Department Highlights	10
Office of the Commissioner	12
Division of Environmental Health	13
Division of Disease Control	18
Division of HIV-STD Services	21
Division of Community & Maternal Child Health Services	23
Division of Public Health Laboratories	26
Appendix	
Organizational Chart	28
Expenditures by Control Center Piechart	29
Revenues by Type Piechart	30
Expenditures by Type Piechart	31
Percentage of Two-year-old Children Immunized	32
Cases of Notifiable Diseases Report Annual Table	33
Early Intervention (EI) Program Referrals Chart	34
EI Cases Closed, Individualized Family Service Plan, Caseload Charts	35
EI Program Trends Chart	36
Departmental Programs Telephone Numbers	37

Nassau County Board of Health



Bruce A. Lister
Chair



Norma J. Henriksen
Vice Chair



Lawrence Ravich, M.D.



Samuel M. Gelfand, M.D.



Joan L. Caemmerer



David M. Ackman, M.D., M.P.H.
Commissioner and Secretary to the Board

Nassau County Board of Health **Role and Responsibilities**

The Nassau County Board of Health and the Nassau County Department of Health were created in 1938 by the Nassau County Charter.

The Board of Health, which meets monthly, consists of five members, two of whom must be physicians. The County Executive recommends them to the Nassau County Legislature for five-year terms to enforce the public health law as well as New York State and local sanitary codes. The duties of the Board include the power to:

- Prescribe the duties and direct the Commissioner of the Department of Health.
- Make and publish orders and regulations for the preservation of life and health.
- Make orders and regulations for the supervision of nuisances and other matters detrimental to the public health in special or individual cases.
- Restrain, by injunction, violators of its orders and regulations.
- Issue subpoenas, compel the attendance of witnesses, and administer oaths and complete testimony.
- Issue warrants to peace officers to enforce the law.
- Prescribe and impose penalties for violations of, or failure to comply with, its orders or regulations or any of the regulations of the state sanitary code.

Members of the Board of Health are:

Bruce A. Lister – Chair
Norman J. Henriksen – Vice Chair
Lawrence Ravich, M.D.
Samuel M. Gelfand, M.D.
Joan L. Caemmerer

Secretary to the Board of Health: David M. Ackman, M.D., M.P.H., Commissioner

Inquiries to the Nassau County Board of Health can be addressed to:

Mr. Bruce A. Lister, Chair
Nassau County Board of Health
C/o Nassau County Department of Health
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Message from the Commissioner

I am pleased to present the Nassau County Department of Health's 2002 Annual Report. It summarizes the activities and accomplishments of the Department and its partners, and describes goals and challenges for 2003.

The year started with the inauguration of a new county executive, Thomas R. Suozzi. He faced unprecedented fiscal challenges that were to affect many county programs. As part of Nassau's four year fiscal recovery plan, the county offered an early retirement incentive that led to the retirement of 37 long time employees, including the Deputy Commissioner, the Director of Environmental Health and numerous bureau and program directors. The entire Department lost 1/8 of its workforce from the start of 2002 and ended 2002 with 354 full and part time employees.

The Department continued work on improving its ability to detect and respond to bioterrorism. The Department developed a bioterrorism response and smallpox vaccination plan and hired several key staff using state grant funds. Much of our preparedness work involved improving communications and coordination with hospitals and other county agencies, particularly the new county Office of Emergency Management.

The problems related to racial and ethnic health and health care disparities continued to receive attention, and the Department worked to develop programs and policies that would begin to address this crucial issue. To that end, the County Executive signed the Nassau County Charity Care Reporting Law that will require hospitals to report on the amount of charity care provided to Nassau residents. The law is intended to encourage hospitals to develop better practices for providing care to indigent patients, and to better distribute the burden of caring for the poor.

The tide against tobacco use continued to swell in 2002. The Department started to develop a smoking cessation course modeled on Suffolk County's highly successful program. More important, Nassau County became the first locality in New York State to sign into law a comprehensive indoor air quality law that offered the same protection to all workers against second-hand smoke. Nassau's law, coupled with similar legislation in New York City and Suffolk County, provided the impetus for the State Legislature to pass a statewide law in early 2003. The law, sponsored by Nassau County Senator Charles Fuscillo, is a great victory for workplace safety and public health.

These highlights were only a small part of the Department's work. At the end of my second year on the job, I continue to be impressed with the Health Department's professionalism, dedication and inventiveness in tackling traditional and new problems in public health.

David M. Ackman, MD, MPH
December 16, 2003

HIGHLIGHTS FOR 2002

Bioterrorism Preparedness

Throughout 2002, Health Department staff continued to develop its Bioterrorism Response Plan. The plan will enable the department to respond quickly and effectively to natural and intentional disease outbreaks. Specific elements include: plans for mass distribution of vaccine and/or medication to prevent illness, rapid investigation of suspected disease outbreaks, environmental assessment of contaminated sites, determination of exposure risks for general population and communication of health information during emergency conditions while working with the Office of Emergency Management (OEM), hospitals, other county agencies as well as with state and federal authorities. In addition, the department was awarded a Federal grant to develop a Medical Reserve Corps unit to organize volunteer health professionals to assist in emergency response activities.

Smallpox Preparedness

The department developed a Smallpox Mass Vaccination Plan, which was submitted to the N.Y. State Department of Health in January 2003. The Director of the Health Department's Division of Disease Control was one of only five health professionals from New York State to travel to the Centers for Disease Control and Prevention (CDC) in Atlanta for training and certification as a Smallpox Vaccine Administrator and Instructor.

West Nile Surveillance and Control

Nassau County Departments of Health and Public Works continued to implement the Mosquito Control Program and West Nile virus surveillance. Health Department epidemiologists provided consultations to the public as well as to health care providers. Epidemiologists investigated 98 suspected and 11 confirmed cases. There were no deaths from West Nile virus in Nassau County. Nationwide in 2002, 40 states reported over 4,000 human cases with 274 fatalities.

Control of mosquito populations was accomplished primarily through habitat modification and the use of larvicides. A total of 1,420 mosquito breeding sites were treated by hand. Aerial spraying of larvicide of South Shore salt marsh areas was conducted on 18 occasions. On only one occasion did the county resort to truck-based spraying of adulticide.

2002 U.S. Open Golf Tournament

The golf tournament was the largest single food-service event monitored in the Health Department's 64-year history. From hot dog stands to gourmet hospitality tents, over 750,000 meals were served – with not one complaint of illness or of unsanitary conditions.

Nassau County Tobacco Indoor Air Quality Law

At the end of 2002, Nassau County passed one of the strongest clean indoor air quality laws in the country and became the first locality in New York State to enact such a comprehensive indoor air quality law. This legislation offered all workers protection from secondhand smoke in their place of business.

Hospital Charity Care Reporting Law

In December 2002, Nassau County enacted the Charity Care Reporting Legislation. This legislation requires hospitals to prepare detailed reports on their charity care policies and the people receiving the care. The new law should help improve their communities' health, better distribute the burden of caring for the indigent and improve medical care for the poor.

By the Numbers

In 2002, the Nassau County Department of Health accomplishments included:

- **Inspected 3,689 food service establishments**
- **Analyzed 4,118 dead bird reports and collected 45 birds for WNV testing; 14 were confirmed positive for WNV**
- **Set 1,128 mosquito traps; gathered 591 pools of mosquitoes; 38 tested positive for WNV**
- **Processed the removal of 152 fuel oil tanks and the abandonment of 2,649 tanks by homeowners**
- **Commenced 434 enforcement actions and assessed \$401,825 in penalties for violations of the New York State Sanitary Code**
- **Case managed 6,471 children in Early Intervention**
- **Investigated 567 suspected tuberculosis cases and provided 9,500 observations as part of Directly Observed Therapy for all 65 confirmed cases of TB**
- **Collected over 5,800 samples of drinking water for comprehensive testing**
- **Served an average of 12,000 women and their families each month in the WIC program**
- **Inspected over 200 X-ray facilities and 57 mammography units**
- **Responded to approximately 100,000 inquires and complaints**
- **Immunized 8,274 residents with flu vaccine and 1, 281 with pneumococcal vaccine**
- **Received 15, 214 laboratory reports of 64 mandated communicable diseases**

OFFICE OF THE COMMISSIONER

Voice: (516) 571-2260
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Fiscal

In 2002, the Health Department's general fund budget was \$73.2 million. The Department also received \$6.2 million in grant funds in addition to the \$6.5 million Ryan White grant monies managed for Nassau and Suffolk Counties.

Human Resources

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Due to the early retirement package offered by the County, total personnel dropped 12% from the prior year. General fund personnel included 255 full and part-time employees; grant fund personnel included 99 full and part-time employees for a total of 354, down from 397 in 2001. The Division of Environmental Health was especially impacted. Retirees from just this one division represented over 300 years of experience. The Department also participated in the Countywide Performance Appraisal project that evaluated every county employee's work performance and potential abilities.

Health Education

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Health Education provides information and referral services as well as health education for children and students at all grade levels in public and private schools, voluntary community based organizations and agencies, senior citizens, patients at the community health centers of the Nassau Health Care Corporation, and the public.

Highlights 2002:

- Tobacco Initiative: Results of surveys sent to all 11 Nassau County colleges and universities indicated that tobacco-free, on-campus housing is offered at all schools. Three stated that they would consider supporting a student advocacy coalition.
- Outreached to 22,500 residents on risk factors associated with tobacco use, chronic disease prevention, healthy eating habits and sedentary lifestyles.
- Staff responded to approximately 13,800 telephone inquiries on health and environmental concerns. The automated telephone line supplied information on Anthrax, West Nile virus and Influenza in English and Spanish to 16,230 callers.
- "Health Education Resources for Nassau County," a service guide of 49 providers, produced and distributed to 2,400 agencies.
- Approximately 137,000 brochures in English and Spanish produced/distributed.

ENVIRONMENTAL HEALTH

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The Division of Environmental Health is divided into three bureaus: Environmental Protection, Environmental Investigation and Environmental Sanitation. It protects the community from those adverse effects resulting from environmental pollution, unsanitary conditions or unsafe practices. It monitors and promotes safe drinking water, food, indoor and ambient air quality. It investigates complaints; conducts tobacco compliance checks; responds to emergency spills and incidents; controls and regulates the storage, handling and disposal of hazardous material and toxic chemicals and monitors the abatement of household lead hazards. It inspects radiological health diagnostic equipment, food service establishments and provides education to food handlers as well as investigates food-borne outbreaks. It oversees recreational facilities including children's camps, pools and bathing beaches; certifies lifeguards and tattoo artists; conducts mosquito control surveillance and coordinates the Nassau County Pesticide Policy.

Highlights - 2002

West Nile Virus Surveillance and Control

After the West Nile virus (WNV) was first detected in September 1999, the Nassau County Departments of Health and Public Works began implementing procedures to enhance the County's existing Mosquito Control Program and to conduct surveillance for possible human cases of the disease.

Surveillance included trapping mosquitoes across the county, identifying breeding areas suitable for larvicide applications (when appropriate), collecting and submitting mosquitoes and dead birds for virus testing, and responding to citizen complaints and inquiries. In 2002, over 1,100 traps were set and almost 600 pools of mosquitoes were collected. Over 4,000 dead bird reports were analyzed, 45 birds were collected for testing with 14 testing positive.

In addition, the department began passive surveillance for possible human cases of West Nile virus encephalitis (WNV) and/or meningitis throughout the spring, summer and fall mosquito seasons. A department epidemiologist provided regular consultation to health care providers and the public regarding all aspects of human surveillance, disease transmission and prevention.

Active surveillance started with daily contacts at all Nassau County hospitals. Staff produced and distributed educational material and arranged for clinical testing for all 98 suspect cases. There were 11 confirmed human cases of West Nile virus infection (11% of the suspects) identified in Nassau County. There were no deaths from the virus in Nassau County. Final negative laboratory tests were obtained for 44% (43 of 98) of the suspect cases.

Laboratory technicians speciated over 26,000 individual mosquitoes from the collected pools. They identified 26 difference species, with 82% of the total represented by six major species. *Culex pipiens/restuans* continued to be the most abundant mosquito species identified (58.4%) and also the one in which the West Nile virus is most frequently detected. A total of 591 mosquito pools were sent to the New York State Department of Health for virus testing, 38 (6.4%) tested positive for the West Nile Virus. All of the 38 positive pools were *Culex pipiens/restuans*.

U.S. Open Golf Tournament

During the week of June 10 - 16, the United States Golf Association (USGA) held the 2002 U.S. Open Golf Tournament at Bethpage State Park's Black Course. It was the largest single special event monitored by the Health Department in the department's 64-year history. The department issued 63 Temporary Food Service Permits, from public hot dog and snack concessions to corporate hospitality tents serving over 3,600 gourmet meals a day. The largest facilities required full-plan reviews for equipment and the installation of a temporary water distribution system. In addition to the initial full-permit inspections at all service sites, division staff made continuous monitoring visits throughout the week.

Over 350,000 people were in attendance with an estimated 750,000 meals served in conjunction with the event. Not a single complaint of illness or unsanitary conditions was received.



At the 2002 U.S. Open Golf Tournament: (Standing left to right): Andrew Wendolovske, Robert Altman, Danielle Mahoney, Cathleen Rolston, Susan Haller. (Seated left to right)- Margaret Catalina, and Robert Johnson.

Source Water Assessment Program

The Environmental Division assisted the New York State Department of Health in conducting the Long Island Source Water Assessment Program for Long Island. The program resulted in the completion of assessments of each public supply well. Public hearings were held in March 2003, and a final report published in June 2003.

Public Water System Security Program

In April of 2002, the Bureau of Environmental Protection began a formal program of evaluating the security preparedness of Nassau County's 49 public water systems in addition to the annual sanitary surveys. Security evaluations were completed for 15 public water systems and included a review of the public water supplier's security plan and any relevant information in the water supplier's emergency plan. In addition, a field inspection was conducted to determine the vulnerabilities of the public water supply wells and the treatment facilities.

Office of Recreational Facilities

In 2002, approximately 400 bathing facilities and children's summer day camps were inspected. Inspections are designed to monitor water quality, ensure safe facilities and prevent illness and drowning. There were no beach closures due to poor water quality.



Don Femminella collects a water sample from the ocean surf at Tobay Beach.

Additional Highlights - 2002

- Responded to over 16,799 inquiries and complaints including: asbestos, animal bites, bathing beaches, food-borne outbreaks in food service establishments, second-hand smoke, mosquitoes, rodents, water and air pollution, drinking water quality, etc.
- Inspected 3,689 food establishments, including checks for compliance of the 1997 Smoking Laws.
- Trained food service workers to help prevent foodborne disease outbreaks in restaurants, delicatessens and other food service establishments.
- Responded to over 16,799 inquiries and complaints about environmental matters.
- Monitored removal of 152 homeowner tanks and the abandonment of 2,649 tanks.
- Initiated the permitting of tattoo and body piercing establishments and the certification of artists working at these facilities. Permitted 25 establishments and certified 75 artists to ensure that permitted establishments meet sanitary requirements and that artists receive training to protect the health of their patrons.

- Established a computer-based photo-identification system for use in the Lifeguard and Tattoo/body Piercing Artist Certification Programs. The system allows photo I.D. cards to be issued to individuals who have been certified. Approximately 2,000 lifeguards and 75 tattoo artists were issued certification cards during the year
- Continued the Adolescent Tobacco Use Prevention Act (ATUPA) compliance checks with minors program to deter the sale of tobacco to those under 18 years of age. A total of 1,568 "stings" were conducted which resulted in a compliance rate of 88% by tobacco vendors, up from 81% in 2001.
- Conducted 773 toxic and hazardous material storage facility inspections; issued 845 operating permits; registered 252 new facilities; and processed reports of 228 tank tests, 173 tank removals and nine large tank abandonments.
- Continued to investigate gasoline spills in cooperation with the New York State Department of Health and the NYS Department of Environmental Conservation and assisted in the determination of the impact of gasoline spills.
- Conducted 30 inspections of major sources of air pollution regulated by the NYSDEC under Title V of the Clean Air Act Amendments of 1991.
- Promoted Integrated Pest Management procedures and the Nassau County Pesticide Policy which advocates the minimum use of pesticides and the avoidance of their misuse.
- Monitored 54 public supply wells in a cooperative program with the Suffolk County Department of Health Services and the NYS Department of Environmental Conservation in order to identify and define any potential impact on groundwater quality from agricultural, residential and commercial land uses.
- Investigated areas identified with significant groundwater contamination by organic chemicals and cooperated with the NYS Departments of Health and the NYS Department of Environmental Conservation as well as the US Environmental Protection Agency to assess health risks and remediation needs.
- Reviewed and approved engineering construction plans for 62 water supply facilities; 98 toxic and hazardous material storage tanks and areas; 12 realty subdivisions; three commercial sanitary disposal systems and 343 water service line backflow prevention devices.
- Monitored the quality of source and distribution system drinking water and collected over 5,800 samples for comprehensive testing.

DISEASE CONTROL

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The Division of Disease Control protects the public from the spread of communicable diseases through the investigation of reported communicable diseases, surveillance for diseases and by taking appropriate actions to prevent potential outbreaks. Some of the actions taken to prevent outbreaks include: immune globulin prophylaxis for individuals exposed to hepatitis A, immunizations for people exposed to measles, and confirmation of appropriate treatment for individuals with tuberculosis (TB). Disease Control also maintains a 24-hour medical consultation service for notifiable diseases and for physician consultation.

HIGHLIGHTS - 2002:

Bioterrorism (BT) and Smallpox Preparedness

The Bioterrorism (BT) Preparedness Program is a unique, multidivisional unit charged with the coordination, planning and implementation of the public health response to biological emergencies. This program manages resources for development and implementation of a Bioterrorism Response Plan in collaboration with the New York State Department of Health and the Nassau County Office of Emergency Management. Department staff also participated in meetings with the New York City Metropolitan Region Bioterrorism Task Force, the Nassau Academy of Medicine, the American Academy of Pediatrics and the Nassau-Suffolk Hospital Council.

In 2002, the Department was awarded one of 50 federal grants to develop a Medical Reserve Corps (MRC) unit. The MRC will enhance public health capacity by organizing volunteer health professionals to assist in emergency response activities such as mass distribution of medication.

The Department sponsored a workshop and table-top drill with all 13 Nassau County hospitals to help prepare for a major communicable disease outbreak. It also organized a Hospital BT Coordinators Group to respond to planning needs. The Department also continued refinement of its Incident Command Structure, which allows the Health Department to more easily coordinate its emerging response functions with other agencies.

Also in 2002, staff began planning and preparing the Department's Smallpox Mass Vaccination Plan, which was submitted to the New York State Department of Health on January 15, 2003. The Director of the Division of Disease Control was one of only five public health professionals from New York State sent to the Centers for Disease Control and Prevention (CDC) in December 2002 to be trained and certified as a Smallpox Vaccine Administrator and Instructor.

Activities to be implemented in 2003 will include planning and conducting multi-agency drills for the treatment of the public following exposure to a bioterrorist agent and providing smallpox pre-exposure vaccinations to appropriate public health staff (who are responsible for the investigation of suspect smallpox cases) and to hospital staff (who are responsible for caring for patients with possible smallpox.)

Record Levels for Immunization Coverage

In 2002, 88% of the 2-year old children in Nassau County had their basic immunizations with 4 doses of diphtheria-tetanus-pertussis, 3 doses polio, 1 dose measles-mumps-rubella, 3 doses haemophilus influenza type B and 3 doses hepatitis B vaccines (4-3-1-3-3). The Immunization Action Plan (IAP) provides professional and public education to increase the number of young children immunized. Program staff conducted medical record reviews for completeness of immunization for two-year-old children at 27 pediatric practices in Nassau County. This represents a 72% increase in vaccination coverage since 1997.

In 2002, program staff conducted medical record reviews for adequacy of the recommended influenza and pneumococcal immunizations for adults age 65 years and older at 13 medical practices: 67% of adults aged 65 years and older had documentation that they had received influenza vaccine and 30% had documentation that they had received pneumococcal vaccine.

This program also supports the Nassau Suffolk Adult Immunization Coalition which promotes public and professional education and programs to provide senior adults with influenza and pneumococcal vaccines. In 2002, 8,274 Nassau County residents received influenza vaccine and more than 1,281 people received pneumococcal vaccine at committee member program sites.



Abby Greenberg, M.D., Minawatee Cheddie, R.N., and Elaine Yeoman, P.H.N. at the 36th National Immunization Conference, April 2002, with their poster presentation entitled "Provider Based Immunization Initiative (PBII) for Adult Influenza and Pneumococcal Vaccine."

Additional Highlights - 2002

- Received 15,214 laboratory reports of 64 communicable diseases that are mandated to be reported, including 1,063 laboratory reports of possible Lyme disease.
- Investigated and verified the diagnosis of 10,000 reports of communicable diseases (excluding tuberculosis and sexually transmitted diseases): 1,379 cases were identified, including 692 food-borne illnesses, 79 cases of Lyme disease, 197 cases of meningitis and 79 cases of hepatitis B.
- Investigated and verified the diagnosis in 567 suspect tuberculosis cases. Provided case management for all 65 confirmed cases of TB until completion of the 6-18 month course of treatment.
- Provided daily Directly Observed Therapy (DOT) services for all persons receiving medications for TB disease. In 2002, 9,500 DOT observations were made.
- Identified and tested 302 persons in contact with infectious TB individuals in 2002.

DIVISION OF HIV AND STD CONTROL

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HIV Bureau: The bureau focuses on risk reduction, education, and early identification of those infected with HIV. These activities are done in partnership with community-based organizations, members of the faith community and schools as well as other county agencies. The Bureau also serves as a repository for HIV/AIDS statistics and assists newly infected individuals in notifying their sexual and needle-sharing contacts through its PartNer Assistance Program (PNAP).

NASSAU COUNTY HIV COMMISSION

The HIV Bureau also provides technical support for the Nassau County HIV Commission, a 33-member organization consisting of representatives from community-based organizations including religious, minority, educational, medical, private and public institutions, and other service providers as well as individuals infected and affected with HIV.

NASSAU COUNTY AND THE RYAN WHITE CARE ACT

The bureau manages the federal Ryan White Title 1 grant award for the Nassau-Suffolk Eligible Metropolitan Area. This grant funds services for those infected and affected with HIV such as medical and mental health care, transportation costs, mental health care, respite care, case management, and housing assistance.

- Nassau and Suffolk Counties together are considered an “Eligible Metropolitan Area” (EMA) for purposes of federal funding under the Ryan White Care Act.
- As of December 31, 2001, there were 2,769 people living with AIDS and an estimated additional 2,494 with HIV in the EMA.
- Nassau County has served as the applicant, grantee and initial recipient of the Ryan White Title 1 Grant Award for the Nassau-Suffolk EMA since 1993. These awards have steadily increased from an initial \$2,012,809 to \$6,470,593 for fiscal 2003.
- A total of 117,847 units of service were provided to clients in both counties.

Successful Peer Education Conference Draws Hundreds

The HIV Commission Prevention Committee held a successful youth conference, Heart B.E.A.T.S. (Bringing Education About AIDS To Students), with 190 young people from 22 high schools and youth groups. The conference included peer education programs in theatrical presentations and interactive workshops that addressed barriers to HIV education. The conference concluded with an HIV-infected young adult who addressed the other teen attendees, which opened a dialogue about HIV/AIDS and encouraged young people to share information with their peers.

Successful Health Fair Sponsored at Nassau Community College

Over 300 students and adults were provided with educational materials and condoms at a health fair at the Nassau Community College . this activity was also supported by the Department of Drug and Alcohol, the Nursing Department of the college, and Planned Parenthood of Nassau County..

HIGHLIGHTS - 2002

- 442 HIV pre-test counseling sessions and 334 post-test sessions at the Nassau Health Care Corporation Community Health Centers. Of the 334 tested, five individuals were found HIV positive.
- 436 HIV counseling and testing sessions and 301 post-test sessions at the Nassau County Correctional Center. Of the 301 tested, four were found HIV positive.
- 5,419 high-risk individuals received one-on-one instruction on HIV prevention at local barbershops, beauty parlors, nail salons, libraries, bus stops and street corners.
- 4,708 individuals at community-based agencies and other venues received programs on HIV prevention.
- 5,201 adolescents from youth agencies, the Juvenile Detention Center and schools across Nassau County received HIV/AIDS prevention education.

Sexually Transmitted Disease (STD) Control Bureau: The primary focus of this bureau is to protect the public from the spread of STD through the investigation of reported cases of gonorrhea, syphilis, and chlamydia. The staff verifies appropriate treatment of the index case and interviews the individual for sexual contacts. The staff notifies partners and refers them for assessment and treatment. STD Control staff also provides education of health care providers on Centers for Disease Control and Prevention (CDC) Treatment Guidelines.

COMMUNITY & MATERNAL CHILD HEALTH SERVICES

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The Division of Community & Maternal Child Health Services provides administrative support to community-based programs and facilitates coordination and integration of services to children and families. The Division includes:

- Community Health Worker Program
- Injury Prevention Program
- Office of Children with Special Health Care Needs
 - ✧ Early Intervention Program
 - ✧ Physically Handicapped Children's Program
- Office of Emergency Medical Services and Bioterrorism Preparedness
- Perinatal Services Network
- Women, Infants & Children Program (WIC) Program

HIGHLIGHTS FOR DIVISION - 2002

Early Intervention Program (EI).

The EI Program is responsible for authorizing, coordinating, evaluating and paying for specialized services to children under three years of age with developmental delays, and their families. Services are managed through an Individual Family Service Plan (IFSP) with contracted agencies serving as evaluators and service providers. During 2002, services were provided to 6,471 children. These services include: evaluation, speech/language therapy, physical therapy, occupational therapy, special education, family counseling, transportation and service coordination.

Physically Handicapped Children's Program (PHCP) The PHCP Program provides financial assistance to families of children, from birth to age 21, for medical services related to certain chronic health problems and disabilities. During 2002, the program paid for all or part of medical, surgical, rehabilitative, orthodontic or other related services to 900 children who meet medical and financial eligibility.

The Nassau County Perinatal Services Network (NCPSN).

The NCPSN fosters collaboration among health/human service providers and consumers to reduce infant morbidity and mortality. It identifies and ameliorates gaps in service and barriers to accessing care by at-risk pregnant women. The Network is a consortium of 30 diverse health and human service providers representing 14 agencies/organizations as well as consumers. The Network provided services to 170 pregnant and/or parenting women. Through outreach and collaboration with our partners, the Network provided education on post partum depression, infant mortality and domestic violence to more than 250 providers and consumers.



Nastasha Estrada with a WIC family



Joe Ortiz meeting with WIC participant

The Community Health Worker (CHW) Program

This program continues to outreach and provide case management services to high-risk and low-income pregnant women in the village of Hempstead. The CHWP provided services to 172 families in the grant year of 2001-2002. Ninety-eight percent were indigent and underserved pregnant women. Among our caseload of newborns, 8.6% were low birthweight babies. These five children were all from multiple births. All children were screened for developmental delays and six infants were referred to the Early Intervention Program.

Office of Emergency Medical Services

During 2002, the Office participated in the management of pre-hospital emergency medical services in the County through membership in the Regional EMS Council and by providing staff and resources to the Regional Medical Advisory Committee and Subcommittees. The Office of EMS is also responsible for managing the credentialing system for the approximately 650 advanced emergency medical technicians in the County. EMS credentialing ensures the current certification and training of technicians who respond to patients in Nassau County and transmits the status of the technician to the physician at Medical Control.

Injury Prevention Program. This program provides information and educational materials to community, professional and parenting groups on topics such as traumatic brain injury prevention, scald burn prevention, child passenger safety, home safety and swimming pool safety. Program highlights for 2002 included expanded outreach for child passenger safety targeting low-income, non-English speaking communities. Staff continues to train 5th and 6th grade "peer educators" through the "Jello in a Jar" program. This program reinforces the importance of wearing helmets and protective equipment while bicycle riding, skating and riding scooters.

Women, Infants & Children Program (WIC) Program

WIC is a nutrition education program that provides supplemental food for pregnant, breastfeeding, and postpartum women, infants, and children up to age five. The WIC program currently serves up to 12,000 participants each month. WIC operates permanent clinic sites in Hempstead, Freeport, New Cassel, Elmont, and Nassau University Medical Center. The communities of Long Beach, Inwood, and Glen Cove are serviced a few days a month in host sites. Plans are in place to convert the satellite in Long Beach to a full service permanent site. WIC coordinates with and refers to numerous other programs for pregnant women and their children.

DIVISION OF PUBLIC HEALTH LABORATORIES Voice: (516) 572-1202
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The Division of Public Health Laboratories provides essential analytic and diagnostic laboratory services to assess the status of community health in Nassau County. It maintains the necessary technical expertise and instrumentation to evaluate disease outbreaks, monitor disease control programs, and test for the presence of bacterial and chemical contaminants in the environment. It serves as a center for developing health assessment methodologies, rapid response capabilities to new etiological agents, and rapid response capabilities during environmental emergencies.

Six specialized clinical and environmental laboratory units provide:

- serodiagnostic screening and confirmatory testing for virus serology
- immune status evaluation for communicable diseases
- comprehensive cultural and microscopic capabilities for identifying the pathogenic agents of communicable disease
- protocol for tracking foodborne illnesses
- identification of disease carrying insects
- screening for lead poisoning and
- the identification of bacterial and chemical agents in water, air, soil, dust and consumer products

Spectrometric "fingerprinting" for unknown substances is available in emergency situations involving hazardous materials.

HIV TESTING:

HIV testing during 2002 showed a significant preference for the new oral fluid procedure. Forty-three percent (42.6%) of the patients tested were evaluated by "Orasure" with a total positive rate of 0.85%. Oral fluid specimens are easier to collect and are more acceptable to patients because of the non-invasive method of specimen collection. The use of "Orasure" is planned as a major public health initiative in 2003.

SEXUALLY TRANSMITTED DISEASES:

With grant funding by the New York State Department of Health, the STD laboratory introduced a new DNA Probe procedure that allows for the simultaneous determination of N. gonorrhea and Chlamydia on a urine specimen. Beginning October 5, 2001, the new procedure was used to evaluate the inmate population at the Nassau County Correctional Center. By the end of 2002, 8,157 inmates were tested resulting in a 3.6% positive rate for Chlamydia and a 0.7% positive rate for N. gonorrhea.

COOPERATIVE PARTNERSHIP WITH THE PUBLIC WORKS LABORATORY:

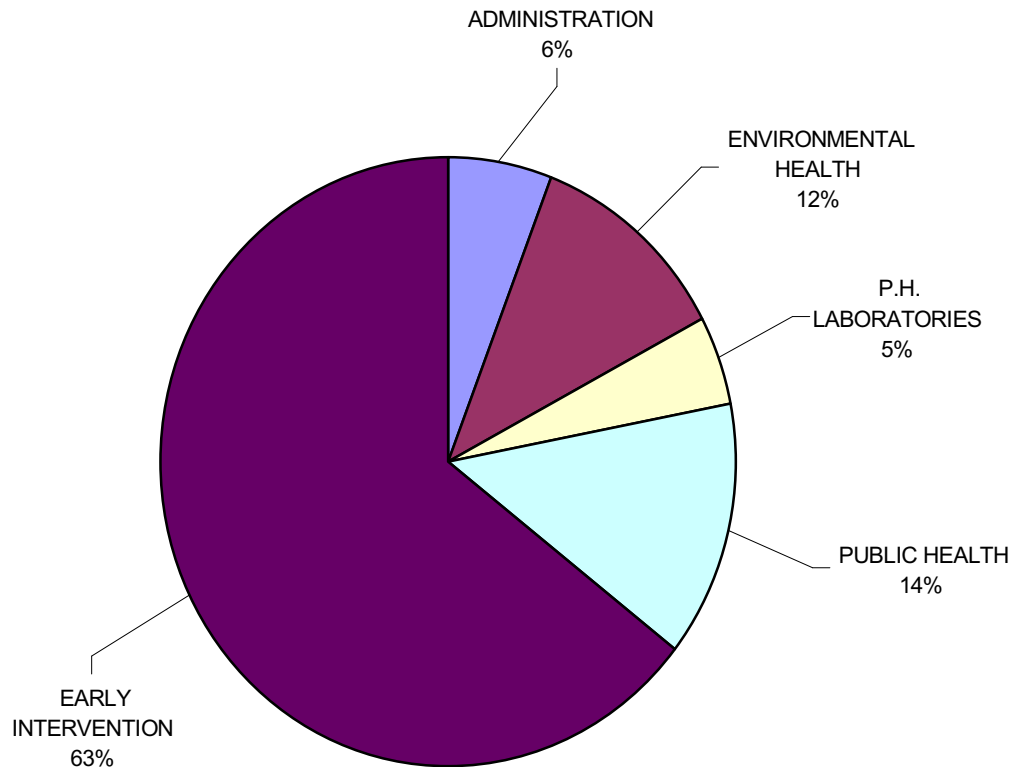
Due to the numerous retirements of senior staff in both the Nassau County Health Department and Public Works Laboratories, an informal partnership was developed to combine resources for each other's benefit and avoided the additional expense of contracting these tests out to a private laboratory. As a result, Health Department samples for Biochemical Oxygen Demand testing were submitted to the Public Works Laboratory at Cedar Creek and Department of Public Works samples for coliform testing were submitted to the Health Department Laboratory during 2001.

AIR MONITORING INITIATIVE

The year 2001 was the first time the air quality standard for ozone was evaluated using the new eight-hour rolling average of 0.084 ppm instead of the previous hourly average of 0.125. This change lowered the acceptable maximum concentration for ozone. In 2002, ozone exceedences were calculated by both old and new methods for comparative purposes. If the old hourly average criteria had been used, only one ozone measurement would have exceeded acceptable levels in 2002. With the new 8-hour standard, seven days were recorded that exceeded acceptable levels.

Organization chart

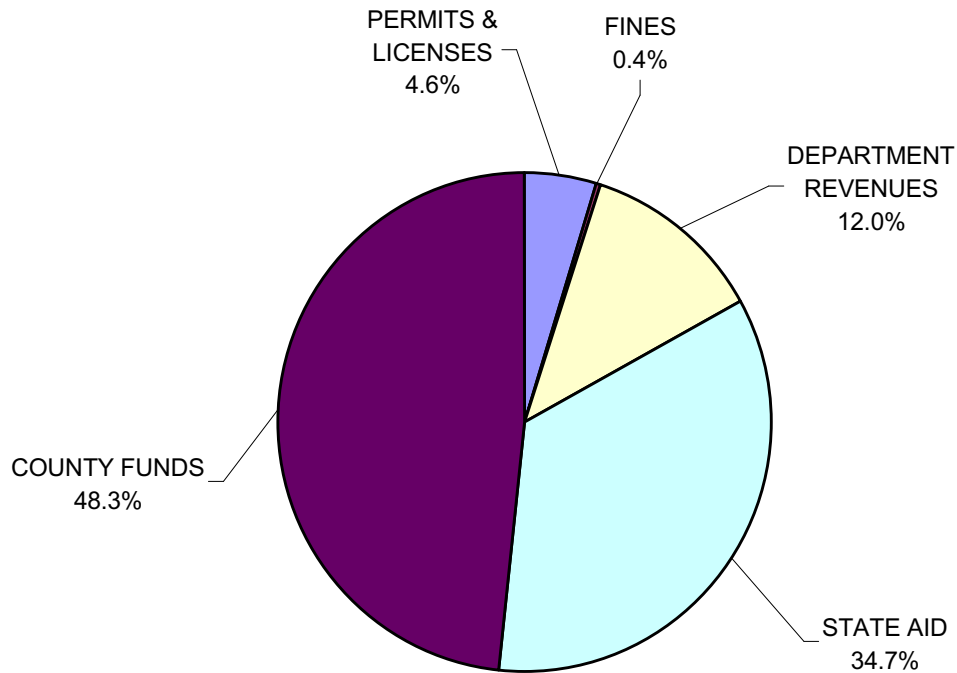
NASSAU COUNTY DEPARTMENT OF HEALTH
FY2002 EXPENDITURES
BY CONTROL CENTER



HE10 - ADMINISTRATION	\$4,176,934
HE20 - ENVIRONMENTAL HEALTH	8,439,113
HE30 - P.H. LABORATORIES	3,469,476
HE40 - PUBLIC HEALTH	9,949,713
HE51 - EARLY INTERVENTION	<u>47,232,883</u>
TOTAL	<u><u>\$73,268,119</u></u>

Note: Nassau County Department of Health also received \$6.2 million in grant funds, in addition to the \$6.5 million Ryan White grant monies managed for Nassau and Suffolk Counties.

NASSAU COUNTY DEPARTMENT OF HEALTH
FY2002 REVENUES
BY TYPE

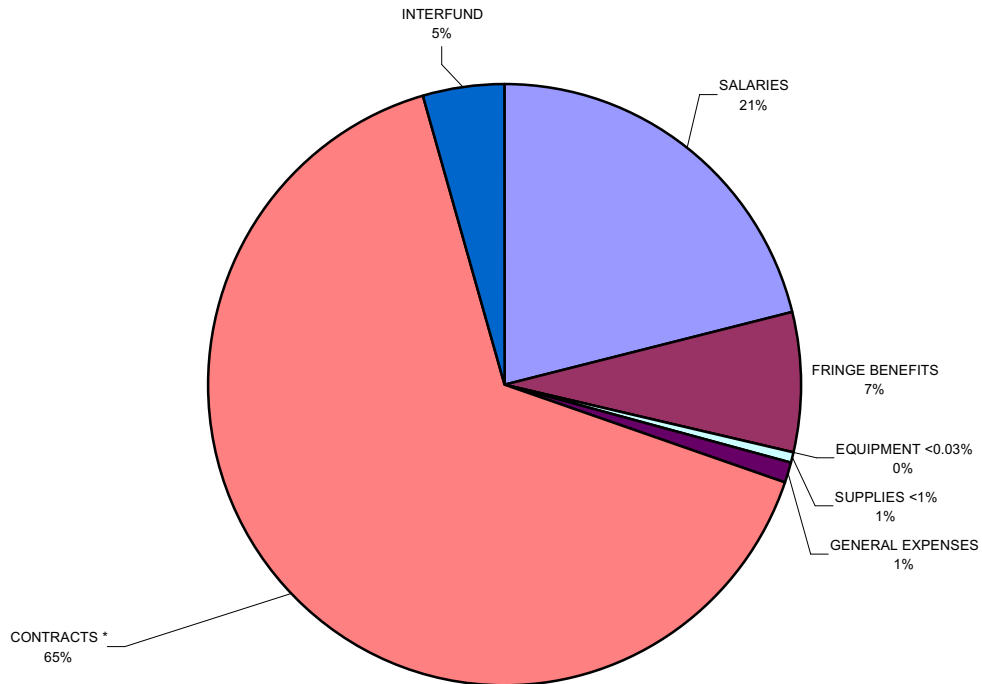


PERMITS & LICENSES	\$3,385,925	
FINES	324,535	
DEPARTMENT REVENUES	8,773,525	
STATE AID	25,423,773	a>
COUNTY FUNDS	<u>35,360,361</u>	
TOTAL	<u><u>\$73,268,119</u></u>	

a> Includes \$33,131 FEMA monies passed through NY State.

Note: Nassau County Department of Health also received \$6.2 million in grant funds, in addition to the \$6.5 million Ryan White grant monies managed for Nassau and Suffolk Counties.

NASSAU COUNTY DEPARTMENT OF HEALTH FY2002 EXPENDITURES BY TYPE



SALARIES	\$15,564,267
FRINGE BENEFITS	5,333,428
EQUIPMENT <0.03%	19,441
SUPPLIES <1%	367,661
GENERAL EXPENSES	946,990
CONTRACTS *	47,721,539
INTERFUND	3,314,793
TOTAL	<u><u>\$73,268,119</u></u>

* Contracts included payments to Early Intervention (EI) providers and \$5.0 million payment to NUMC for provision of essential public health services.

Note: Nassau County Department of Health also received \$6.2 million in grant funds, in addition to the \$6.5 million Ryan White grant monies managed for Nassau and Suffolk Counties.

Percentage of Two Year Old Children Who Have Received All the Recommended Immunizations For That Age.

Year	4-3-1*	4-3-1-3-3**	4-3-1-3-3-1***
2002	90%	88%	78%
2001	86%	84%	74%
2000	82%	80%	64%
1999	72%	70%	35%
1998	74%	70%	N/A
1997	65%	51%	N/A

* 4-3-1: 4 doses diphtheria-tetanus-pertussis, 3 doses polio and 1 dose measles, mumps, rubella vaccines

** 4-3-1-3-3: 4 doses diphtheria-tetanus-pertussis, 3 doses polio, 1 dose measles, mumps, rubella, and 3 doses haemophilus influenza type B vaccines.

*** 4-3-1-3-3-1: 4 doses diphtheria-tetanus-pertussis, 3 doses polio, 1 measles, mumps, rubella, 3 doses haemophilus influenza type B, and 1 dose varicella vaccine.

In 2002, the percentage of two year old children who have received all appropriate doses of individual vaccines met or exceeded the recommended standard of 90% for all except varicella vaccine (86%)

4 doses DTP = 90%
 3 doses DTP = 100%
 3 doses Polio = 95%
 1 dose MMR = 94%

3 doses Hib = 99%
 3 doses Hep B = 96%
 1 dose Varicella = 86%

CASES OF NOTIFIABLE DISEASES REPORT - ANNUAL TABLE

DISEASE	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002
Amebiasis	26	29	21	20	25	31	29	20	32	13
Babesiosis	1	2	2	4	5	2	3	3	2	1
Botulism	0	0	0	0	1	0	0	0	1	0
Brucellosis	0	0	0	1	0	1	0	0	0	0
Campylobacteriosis	261	279	253	198	189	196	195	190	167	171
Chlamydia*	--	--	--	--	--	--	--	349	1229	1335
Cholera	0	0	1	0	0	0	0	1	0	0
Cryptosporidiosis	--	6	16	9	16	14	23	20	6	11
Cyclospora	--	--	--	14	28	4	1	3	1	0
E. Coli 0157:H7 Inf.	2	8	7	12	2	11	7	18	18	11
Ehrlichiosis	--	--	--	--	--	--	--	3	0	0
Encephalitis	14	0	6	8	7	6	12	21	14	32
Foodborne Illness	0	0	0	0	4	7	1	6	10	1
Giardiasis	168	189	195	222	201	176	187	183	145	150
Gonococcal Inf.	770	623	627	338	263	369	383	423	470	496
Haemophilus Infl. (Inv.)	7	20	7	0	8	8	8	12	6	12
Haemophilus Infl.B. (Inv.)	--	--	--	--	--	--	--	0	2	0
Hemolytic Uremic Synd.	--	--	--	1	0	0	0	4	0	0
Hepatitis A	88	56	39	53	61	60	29	49	59	45
Hepatitis B	35	33	22	21	29	20	11	23	17	20
Hepatitis C (Non A/Non B)	8	0	5	0	2	2	1	1	3	4
Hepatitis – unknown	0	0	0	0	1	0	2	1	0	0
Hepatitis B Carrier Preg.	329	69	67	42	77	55	38	48	77	62
Histoplasmosis	0	0	0	0	2	0	2	(((((((((
Hospital Assoc. Infection	--	--	--	--	--	--	--	1	0	0
Kawasaki Syndrome*	0	6	3	4	4	9	2	(((((((((
Legionellosis	1	3	5	5	4	5	3	9	5	7
Leprosy	0	0	0	0	1	0	0	(((((((((
Listeriosis	--	4	6	6	14	6	15	15	3	9
Lyme Disease	133	181	166	164	122	110	105	88	48	79
Malaria	15	12	16	24	10	17	10	19	19	10
Measles	3	9	0	5	2	0	2	0	2	0
Meningitis, Aseptic	70	65	82	86	69	100	24	93	172	178
Meningitis, Pneumo.	5	8	10	15	6	7	0	2	1	0
Meningitis, Other Bact.	35	26	27	23	16	21	25	8	15	15
Meningitis, Unspec.	13	7	21	22	22	25	19	11	9	2
Meningococcal Infection	16	9	9	8	10	7	6	10	7	3
Mumps	1	0	2	2	2	0	1	3	2	1
Pertussis	16	11	9	13	11	4	7	12	4	7
Psittacosis	1	0	0	0	0	0	0	0	0	0
Reye's Syndrome	0	0	0	0	0	0	0	(((((((((
Rocky Mtn. Spotted Fever	0	0	2	1	2	1	1	1	0	0
Rubella	11	0	0	1	2	5	17	0	0	1
Salmonellosis	232	297	298	285	290	214	209	192	193	226
Shigellosis	93	68	107	72	67	95	77	222	279	63
Strep Group A, Invasive	--	--	3	25	29	27	29	30	43	28
Strep Group B, Invasive	--	--	--	--	2	14	32	38	43	57
Strep Pneumoniae Inv.	--	--	--	18	19	34	68	94	134	137
Syphilis: Early	132	65	32	21	17	9	11	4	7	14
Syphilis: Late	270	185	199	175	197	141	109	73	58	52
Syphilis: Congenital	23	9	10	2	3	3	3	2	2	1
Toxic Shock Syndrome	3	2	1	1	1	1	0	1	0	0
Tuberculosis	132	115	95	82	84	90	74	70	94	65
Typhoid Fever	4	2	2	4	7	6	3	4	4	4
West Nile Virus	-	-	-	-	-	-	6	0	4	11
Typhus*	1	0	0	0	0	1	0	(((((((((
Yersiniosis	16	12	13	7	14	8	8	8	10	4
Total	2935	2410	2386	2014	1948	1922	1798	2388	3417	3344
--Records not kept in the indicated year										
*** "no longer reportable, effective August 30, 2000"										
-not reported before 1999										

Nassau County Department of Health
EARLY INTERVENTION PROGRAM
 December 2002
Referrals

Referred By:	Current Month	Year to date # %	
Birth Certificate	0	0	0
Community Program	63	733	18.40
Developmental Disabilities Service Organization	0	0	0
Early Childhood Direction Center	9	150	3.77
Infant-Child Health Assessment Program	22	180	4.52
Foster Care Agency	0	18	.45
Hospital	11	164	4.12
New Born Screen	0	0	0
Prenatal Care Assistance Program	0	0	0
Physically Handicapped Children's Program	0	0	0
Primary Health Care Provider	11	110	2.76
WIC	0	0	0
Parent/Family*	182	2,622	65.83
Other County Department of Health	1	6	.15
Visiting Nurse/Home Health Care Agency	0	0	0
Other	0	0	0
Unknown	0	0	0
Total Children Referred	299	3,983	100 %
*Parent Referral Breakdown: 12/02	Current Month	Year to date # %**	
Pediatrician	97	1,436	36.05
Friend/Neighbor	29	410	10.29
EI Program In Another County	2	42	1.05
EI Program Previously Ineligible	27	334	8.39
Elder Sibling In EI	11	196	4.92
Program/Therapist	5	39	.98
CPSE	2	38	.95
Child Care Providers/Community Agencies	8	117	2.94
Media	1	8	.20
Total Parent Referrals	182	2,622	65.83

**Percent of Total Referrals

EARLY INTERVENTION PROGRAM
December 2002

Cases Closed

Reason for Closure*	Current Month	Year to Date # %	
Delay/Condition resolved	60	589	16.73
Family Refused	36	149	4.23
Can't locate family	2	32	.91
Transferred to 3-5 System	166	981	27.87
Evaluation found not eligible	122	1,095	31.11
Family move-out of county	4	50	1.42
Family move-out of state	8	46	1.31
Child died	0	9	.26
Transferred to I-CHAP	0	18	.51
Parents Refused - Contact in 2 mos	4	11	.31
Ageout, Not 3-5 refer to other prog	6	18	.51
Ageout, Not 3-5, no referrals	12	46	1.31
Ageout, Elig for 3-5 unknown	103	267	7.59
Duplicate record for this child	0	0	0
Other	0	0	0
Total Cases Closed*	523	3,520	100 %

*May have been referred in previous months

Individualized Family Service Plan

Interim IFSPs developed	10
New IFSPs developed	173
Periodic IFSP reviews conducted	320

Caseload

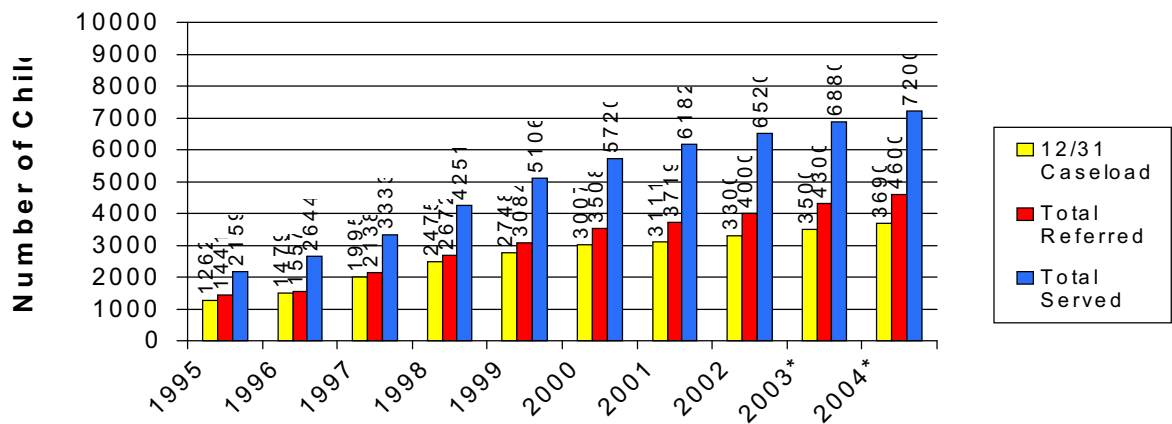
Number of children in process of development of IFSP	520
Number of children receiving IFSP services	2,742
Total Caseload	3,262
Average Caseload per Service Coordinator	90

Nassau County Department of Health

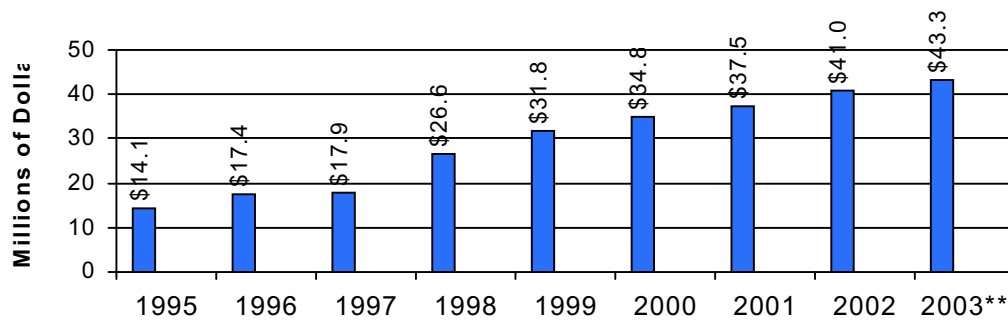
Early Intervention Program

Program Trends

Caseload, Referrals & Children Served



Millions of Dollars Spent on EI Services
(excluding transportation)



*Projected

**Approved Budget

DEPARTMENTAL PROGRAMS TELEPHONE NUMBERS

GENERAL INFORMATION 571-3410

AFTER HOURS EMERGENCIES 742-6154

AIDS-HIV HOTLINE (Counseling Testing) 565-4628
AIR QUALITY 571-3232
ANIMAL BITES 571-2290
BIOTERRORISM PREPAREDNESS PROGRAM 571-3231
CANCER EPIDEMIOLOGY 571-1515
CHEMICAL STORAGE 571-3314
CHILD HEALTH PROGRAMS 571-3749
CHILDREN'S SUMMER DAY CAMPS 571-3680
COMMISSIONER'S OFFICE 571-2260
COMMUNICABLE DISEASE CONTROL 571-3471
COMMUNITY HEALTH ASSESSMENT 571-3344
COMMUNITY HEALTH WORKER PROGRAM 572-0934
COMPLAINTS-GENERAL NUISANCES 571-3678
DIVISION OF DISEASE CONTROL 571-3471
DOG BITES 571-2290
DRINKING WATER 571-3323
EARLY INTERVENTION CHILD FIND (Formerly ICHAP) 571-2452
EARLY INTERVENTION PROGRAM 571-3749
EMERGENCY MEDICAL SERVICES 571-2672
ENVIRONMENTAL ENGINEERING 571-2404
ENVIRONMENTAL HEALTH DIRECTOR 571-3691
FOOD COMPLAINTS & GENERAL INFO. 571-3680
HAZARDOUS TANK REGISTRATION ABANDONMENT 571-3314
HEALTH EDUCATION 571-3345
HEAT AND HOUSING COMPLAINTS 571-3679
HIV BUREAU 571-2019
HIV PARTNER NOTIFICATION PROGRAM 571-0215
HOUSING COMPLAINTS 571-3678
HUMAN RESOURCES 571-4250
IMMUNIZATION ACTION PROGRAM 571-1680
INDUSTRIAL WASTE 571-3314
INFORMATION AND REFERRAL SERVICE 571-3410
INJURY PREVENTION PROGRAM 571-3737
LABORATORY - 209 MAIN ST HEMPSTEAD 572-1202
LEAD POISONING PREVENTION PROGRAM 571-2310
LIFEGUARD CERTIFICATION 571-2591
LYME DISEASE INFORMATION 571-2006

MEDICAL EXAMINER	572-5150
MEDIA LIAISON	571-3417
MOSQUITO CONTROL PROGRAM	571-8707
PERINATAL NETWORK	572-0954
PETROLEUM STORAGE	571-3314
PHYSICALLY HANDICAPPED CHILDREN'S PROGRAM	571-3446
PUBLIC HEALTH NUISANCES	571-3678
PUBLIC WATER SUPPLY	571-3323
RABIES CONTROL	571-2290
RADIOLOGICAL HEALTH	571-3313
SEWAGE SPILLS	571-3323
SEXUALLY TRANSMITTED DISEASES - CONTROL PROGRAM	571-2423
SWIMMING POOLS AND BATHING BEACHES	571-3680
TEMPORARY RESIDENCES	571-3680
TOBACCO CESSATION PROGRAM	571-2022
TOBACCO USE	571-3232
TUBERCULOSIS CONTROL	571-2309
WIC PROGRAM MINEOLA	571-3449
ELMONT	571-8228
FREEPORT	571-8606
HEMPSTEAD	572-0920
NUMC	572-5809
WESTBURY	571-9535

Inside back cover

Board of Health

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Lawrence Ravich, M.D.
Samuel M. Gelfand, M.D.
Joan L. Caemmerer

David A. Ackman, M.D., M.P.H.
Commissioner

County Seal to be inserted

Thomas R. Suozzi
County Executive

Nassau County Legislature box to be inserted